

INDIVIDUALIZED EDUCATION PROGRAM

School Year 1989-93

NAME: Lee or Moore of 20

BIRTHDATE 10/19/74 AGE 8 DATE Dec 17, 1982

PARENTS Margie Moore

DISTRICT OF RESIDENCE 33

COUNTY Kosciusko BUILDING Classified Project

05

EVALUATIONS COMPLETED/
INFORMATION GATHERED

File: Score: Voice Education

indicates that the following text tailoring too much:

Accumulation: slow putting
sugar to a standstill; see

more strict range.

3-SJD
letter about addressing
a taxon for nomenclature

00023
dead specimen packed
Personnel in cabin

0-CV-0
int. Eriksen, "Die alte
Mutter - ein sage und

“Sister, we are in

Case

Case 1:00-cv-00023-SJD-MRM Document 124-8 Filed 08/08/2005

III. ANNUAL GOALS	SHORT TERM INSTRUCTIONAL OBJECTIVES	EVALUATION PROCEDURES & CRITERIA
<p>1. Encourage general practicality, decision making, problem solving, and independence.</p> <p>2. Encourage the right problem solving methods.</p> <p>3. Encourage problem solving by trial and error.</p> <p>4. Encourage problem solving by trial and error.</p> <p>5. Encourage problem solving by trial and error.</p> <p>6. Encourage problem solving by trial and error.</p> <p>7. Encourage problem solving by trial and error.</p> <p>8. Encourage problem solving by trial and error.</p> <p>9. Encourage problem solving by trial and error.</p> <p>10. Encourage problem solving by trial and error.</p>	<p>1. The student will make more informed decisions, especially in problem solving situations.</p> <p>2. The student will make more informed decisions, especially in problem solving situations.</p> <p>3. The student will make more informed decisions, especially in problem solving situations.</p> <p>4. The student will make more informed decisions, especially in problem solving situations.</p> <p>5. The student will make more informed decisions, especially in problem solving situations.</p> <p>6. The student will make more informed decisions, especially in problem solving situations.</p> <p>7. The student will make more informed decisions, especially in problem solving situations.</p> <p>8. The student will make more informed decisions, especially in problem solving situations.</p> <p>9. The student will make more informed decisions, especially in problem solving situations.</p> <p>10. The student will make more informed decisions, especially in problem solving situations.</p>	

Filed 08/08/2005

009075

IV. Program Option	Check Needs	Date to be Initiated	Anticipated Duration	Special Program	Related and Supportive Services	Date Services to be initiated	Anticipated Duration
Regular Education	X				Speech & Language Therapy	Aug. 19, 2003	2 weeks/16 hours
Supplemental Services					Occupational Therapy		
Individual/Small Group Instruction					Physical Therapy		
Special Class/ Learning Center					Attendant Service		
Home Instruction					Transportation		
Residential					Orientation & Mobility		
Other					Counseling		
Needs Which Necessitate Placement in a Separate Educational Facility:					Vocational Assessment		
Other					Work-Study		
					Adaptive Physical Ed.		
					Other		

Recommended District or Educational Agency of Attendance	<u>Hinsdale Township</u>
County	<u>Hinsdale</u>
Building	<u>Cultural Building</u>
Extent of Participation in Regular or Vocational Educational Program:	<u>Full</u>
VI. CRITERIA AND SCHEDULES FOR PERIODIC/ANNUAL REVIEW	

Annual review parental or teacher request

VII. ADDITIONAL SERVICES NEEDED FOR IMPLEMENTATION OF PROGRAM THAT WILL BE PROVIDED BY PARENTS AND/OR OUTSIDE PROFESSIONAL AGENCIES

Case# 1:00-ev-00023-SJD-MRM

The above recommendations have been made by the committee and we feel they are appropriate.

Lee

CONFERENCE PARTICIPANTS:

NAME: Chairperson TITLE:

NAME: TITLE:

I have reviewed the above educational program and ACCEPT ✓ DO NOT ACCEPT the recommendation of the Committee. I also waive my right to certified mail.

NAME: Lee Mccall TITLE: Parent

Date 7-5-03

Parent

EVALUATION OF COMMUNICATION PERFORMANCE

Student Lee Moore Teacher Miss Rudolph Gr. 3 Room _____

As a result of a speech and hearing evaluation, the following speech & language disorders were observed:

Language impairment: A significant deviation in expressive or receptive oral language in the specific areas of morphology (sounds), syntax (grammar), and/or vocabulary.

Articulation impairment: The consistent misarticulation of one or more phonemes. The results of a norm referenced (standardized) prognostic evaluation instrument must be considered for a child below eight years of age prior to determining eligibility for services.

Fluency impairment: Reduced intelligibility and rate because of a high disfluency ratio and/or struggle or avoidance and fear of speaking situations.

Voice impairment: Exhibits difficulties in the areas of pitch, quality, and/or loudness not appropriate to the student's age or sex.

Hearing impairment: Has a measurable hearing loss, the type and/or degree of which is adversely affecting the child's communication skills as determined by an audiologist's evaluation.

Instructions to the Teacher: Your observation, which is part of a multi-factored assessment procedure, is in accordance with the guidelines for current program standards for special education units for speech, language, and hearing services in the state of Ohio (#3301-51-08 B.. 4. C.). Please complete the following with a "yes" or "no".

no The child avoids speaking situations.

no Other children in the class seem to react negatively toward the child because of his/her speech.

no The child's social maturity and interaction is inappropriate for age and grade level.

no The child has difficulty participating in classroom discussions involving two or more persons.

no The child has difficulty hearing and understanding directions, conversation, and material presented during class most of the time.

no The child has difficulty understanding material presented via audio-visual equipment.

no The child has difficulty listening and discriminating likenesses and differences in speech sounds.

no The child uses incomplete sentences and language inappropriate for grade level.

no Vocabulary development and comprehension is inappropriate for grade level.

no The child has difficulty understanding concepts such as space, quantity and time appropriate for age level.

no The child's speech ability is reduced when the child is placed in a stressful situation.

no The child communicates with gesture in lieu of speaking.

no The child has difficulty demonstrating reasoning ability and knowledge of cause-effect relationships appropriate to age level.

no The child's verbal intelligibility is reduced hampering his/her ability to communicate information.

no The child has difficulty correctly producing sounds.

no The child has difficulty blending sounds together to form words.

no The child's vocal quality detracts from the message he/she is trying to communicate.

The following professionals are in agreement that this child is adversely affected due to the presenting communication disorder when compared to his/her peers.

Signed: Miss Rudolph
Teacher

Date October 20, 1982

Susan C. Haas
Speech-Language Pathologist

Date Nov 13, 1982

Ronald N. Mellish
School Representative

Date Jan 5, 1983

Please return to the speech-language pathologist as soon as possible. Thank you for your cooperation.

December 1, 1982

Name: Lee Moore
Age: 8
B.D.: 10/19/74

D.O.B.: 10/15/62
Clinician: Diane Games

Reason for Referral: Miss Rudolph referred Lee for an evaluation due to consistent hoarse vocal quality noted in classroom activities. She noted that the voice became worse during the day and that the hoarseness did not appear to be connected with allergies or a cold.

Vocal Description: During an evaluation the following observations:

- severe, hoarse vocal quality which worsens at the end of the day or following prolonged phonation,
- pitch range limited to 13 notes with habitual pitch at the bottom of range. Pitch varies little during conversational tasks and pitch breaks were noted,
- soft presentation of voice was noted with periods of audible, irregular breathing.
- Lee could sustain a sound for 8 seconds.

History: Lee's voice problem has been evident for several years. There is no history of allergies or illness.

Recommendations:

- Evaluation by an ear, nose and throat specialist to determine if a physical problem is causing the hoarse quality.
- Vocal therapy to reduce the hoarse quality.

Diane Games M.A.
Speech-Language Pathologist

009077

AUXILIARY SERVICES
E.N.T. SPEECH CLINIC
LARYNGEAL REFERRAL

SCHOOL Central BaptistPUBLIC SCHOOL DISTRICT Finneytown School Dist.
OF ATTENDANCE SJ779 Clinton Rd
ADDRESS FOR BILLING Cincinnati, Ohio 45231NAME Moore Lee L.
(Last Middle First)PARENT/GUARDIAN Georgia MooreADDRESS 1280 Meadith PHONE 522-1092 D.O.B. 10/19/74Cincinnati, Ohio 45231REFERRING (THERAPIST/NURSE) Diane C. Hamer DATE Nov. 11, 1982KNOWN MEDICAL HISTORY Hoarse vocal quality had been present for several years. No known history of illnesses or allergies and is not on medication.

Evaluations Completed

Circle OneProblems Noted

Articulation

 Passed / Failed

Language

 Passed / Failed

Voice

Passed / FailedHoarse vocal quality

Dysfluency

Passed / Failed

Hearing

Passed / Failed

EXAMINING LARYNGOLOGIST J.P. H. H. DATE OF EXAM. 12-10-82NOSE: Is there obstruction in the nasal passages? _____
If so, please explain. _____
Is there sinus infection or nasal allergy? _____PHARYNX: Is there any asymmetry of muscle contraction? _____
Are there any growths or other abnormalities? _____

LARYNX: Examination by indirect laryngoscopy _____

*General size of larynx:

Normal _____

Larger than normal _____

Smaller than normal _____

*Function of cords (on phonation)

Symmetrical _____

Bowling _____

Deviation from midline _____

*Approximation:

Complete _____

Partial _____

*Attack:

Normal _____

Hard _____

Incomplete _____

*Appearance of Vocal Folds:

Thickened _____

Edematous _____

Inflamed _____

Infected _____

Malformed _____

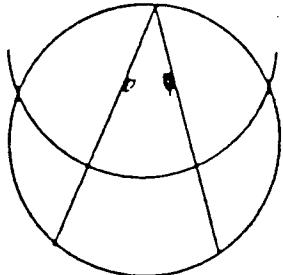
Scars _____

Growths _____

009078

Presence of Vocal Pathology: Please indicate location on diagram.

Nodules _____ Polyps _____ Ulcer _____
 Other _____ None _____



Epiglottis

Size:

Anterior 1/3

Appearance:

Medium 1/3

Hard

Posterior 1/3

Soft

Other

Arytenoid Process

Does this patient have allergies, hypothyroidism, anemia, or any other chronic condition which might contribute to the abnormal voice quality _____

Has this patient's misuse of voice contributed to abnormal structure or function? _____

Do your findings explain the abnormal voice quality? _____

In your opinion, it is possible that a continuation of present voice use may contribute toward future or increased disorders of the mechanism? _____

RECOMMENDATIONS:

Do you recommend any of the following: Silence _____ Duration _____ Limited use of voice _____ Duration _____ Training by a speech clinician to help patient establish easy, efficient use of the vocal mechanism _____

Other recommendations _____

Babat Nase two months (L) & R

Plaster for report 14

Please return to:

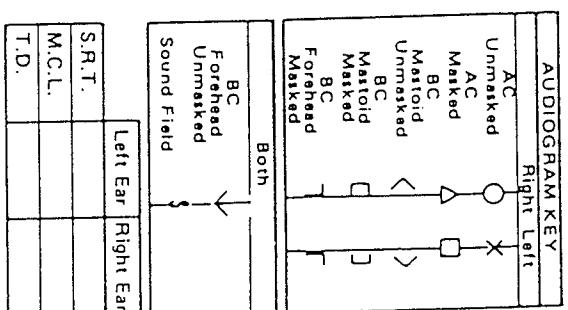
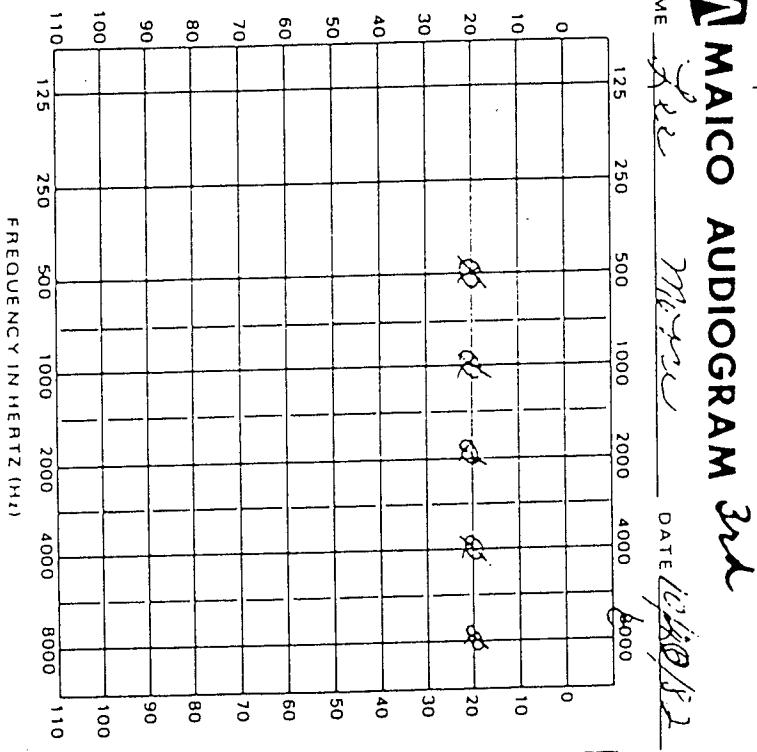
Diane James
Certified Baptist Schools
7645 Winter Road
Cincinnati, Ohio 45224

Cotton

Physician's Signature

Date Dec 10/81

INCLUDE IN THIS SECTION A SUMMARY OF ALL ABNORMAL FINDINGS, ACTIONS TAKEN SUGGESTED FOLLOW-UP AND RECOMMENDATIONS FOR ADJUSTMENT IN SCHOOL PROGRAM



B. Cecchetti

SIGNATURE

609080

Birthdate 10-19-74

Home Address _____

Father's Name John

Business Phone _____

Mother's Name George

Business Phone _____

1) School Central District 2) School _____

3) School _____

4) School _____

09081

IMMUNIZATIONS

TYPE	Date	Date	Date	Date	Date
• DPT	1/12/21/74	1/2/23/74	2/24/75	4/24/76	6/2/79
Td					
• Polio Sabin (Tri)	1/2/23/74	2/24/75	4/23/75	4/24/76	4/2/79
• Measles	7/10/34/75				
• Rubella	7/10/34/75				
Mumps					
Other					

• Required by Compulsory Immunization Law, Section 3301.07 of

Ohio Revised Code

Indicate any conditions and/or diseases of the student the teacher should know of _____

HEARING

Date	Result	Date	Result
3/9/	OK	1/11/	OK
6/20/73	OK	6/16/	OK

VISION

Muscle Balance	Farsightedness	Color
10/8/1981 2/2/83	10/8/1981 2/2/84	10/8/1981 2/2/84

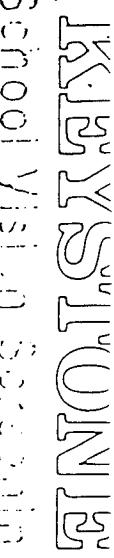
SPEECH

Check appropriate box when applicable:

 Maximum Improvement Corrected**HEARING**

Check appropriate box when applicable:

 Maximum Improvement Corrected**SCHOOL HEALTH RECORD**



Name Jesse Moore Sex M

Wearing glasses? For reading only
for distance only ; both No

School Central Baptist City _____

Grade 4 Room _____

Teacher _____

Date of birth _____ Date of test 2-21-54

With glasses: RE LE
Without glasses: RE LE

Page 11 of 20

FOR USE WITH THE KEYSTONE TELEBINOCULAR
SCHOOL SURVEY CUMULATIVE RECORD FORM NO. 5-B
(CATALOG ORDER NO. 5522-B)

Filed 08/08/2005

Document 124-9

Test 124-9

Our regular procedure is to begin with the Rapid Screening Tests below. If the student passes all the Rapid Tests, he or she has normal (or better) visual skills and no further tests are given. If the student fails any Rapid Tests, however, the full battery of Skills Tests (at the right) is given to determine if a possible vision handicap exists.

Name Zee Moore Sex M Wearing glasses? Yes or reading only
for distance only ; both X. No
School Central Baptist City Snellen Standard (if desired)
Grade 4 Room Teacher Date of test 11-22-83
Date of birth With glasses: RE LE
Without glasses: RE LE

Filed 08/08/2005

Document 124-9

Page 12 of 20

RAPID VISION SCREENING TESTS

	Pass	Fail
A. Simultaneous vision: Both eyes work together	X	
B. Fusion: Eyes are coordinated, see one image	X	
C. Depth perception: Able to tell nearby objects from far-away objects	X	
D. Color vision: Can tell red from green	X	
E. Usable vision:		
Right eye - 100% acuity (sharpness of sight)	X	
Left eye - 100% acuity (sharpness of sight)	X	

NEAR VISION (READING DISTANCE) TESTS

	Pass	Fail
F. Posture: Eyes show correct up-down balance	X	
G. Fusion: Eyes are coordinated, see one image	X	
H. Usable vision:		
Right eye - 100% acuity (sharpness of sight)	X	
Left eye - 100% acuity (sharpness of sight)	X	

COMPREHENSIVE VISUAL SKILLS TESTS

This group of tests is given only if the student fails any of the tests above. The Comprehensive Tests are more detailed and are similar to tests used by many eye specialists.

Scores of these tests are recorded at the right.

Scores checked in the "Passing" column indicate satisfactory performance. Scores checked in other columns show that your child may have a vision handicap . . . and that he or she may benefit from a thorough examination by a professional eye specialist. If you decide to consult an eye specialist, we recommend that you show this report to him.

Please note: Low scores on the tests for Color Vision indicate that your child has some degree of color blindness. Please note that your child has some degree of color blindness. This condition. But it is important that your child knows of this deficiency for his own safety.

Case 100-28 SJD MRM
Date 09-02-83 File # 00028

Please note: If your child is under 9 years of age, a low score on the Depth Perception test may not mean that an eye specialist can help him. Depth perception is a learned skill that is often not fully acquired before age 9.

TEST	POSSIBLE VISION HANDICAP	DOUT- FUL	PASSING NORMAL RANGE	DOUT- FUL	POSSIBLE VISION HANDICAP
SIMUL- TANEOUS VISION			THE TWO EYES WORK TOGETHER		
EYE POSTURE Up-Down Imbalance			LEFT EYE LOW DOWN RIGHT EYE HIGH UP		EYES WORK IN BALANCE
POSTURE In-Out Imbalance			LEFT EYE TEND TO MOVE TOWARD RIGHT EYE TEND TO MOVE TOWARD LEFT		EYES WORK IN BALANCE
FUSION			LEFT EYE TEND TO MOVE TOWARD RIGHT EYE TEND TO MOVE TOWARD LEFT		EYES ARE COORDINATED SEE A SINGLE IMAGE
USABLE VISION Both Eyes	98%	100%	103%	105%	
USABLE VISION Right Eye	98%	100%	103%	105%	
USABLE VISION Left Eye	98%	100%	103%	105%	

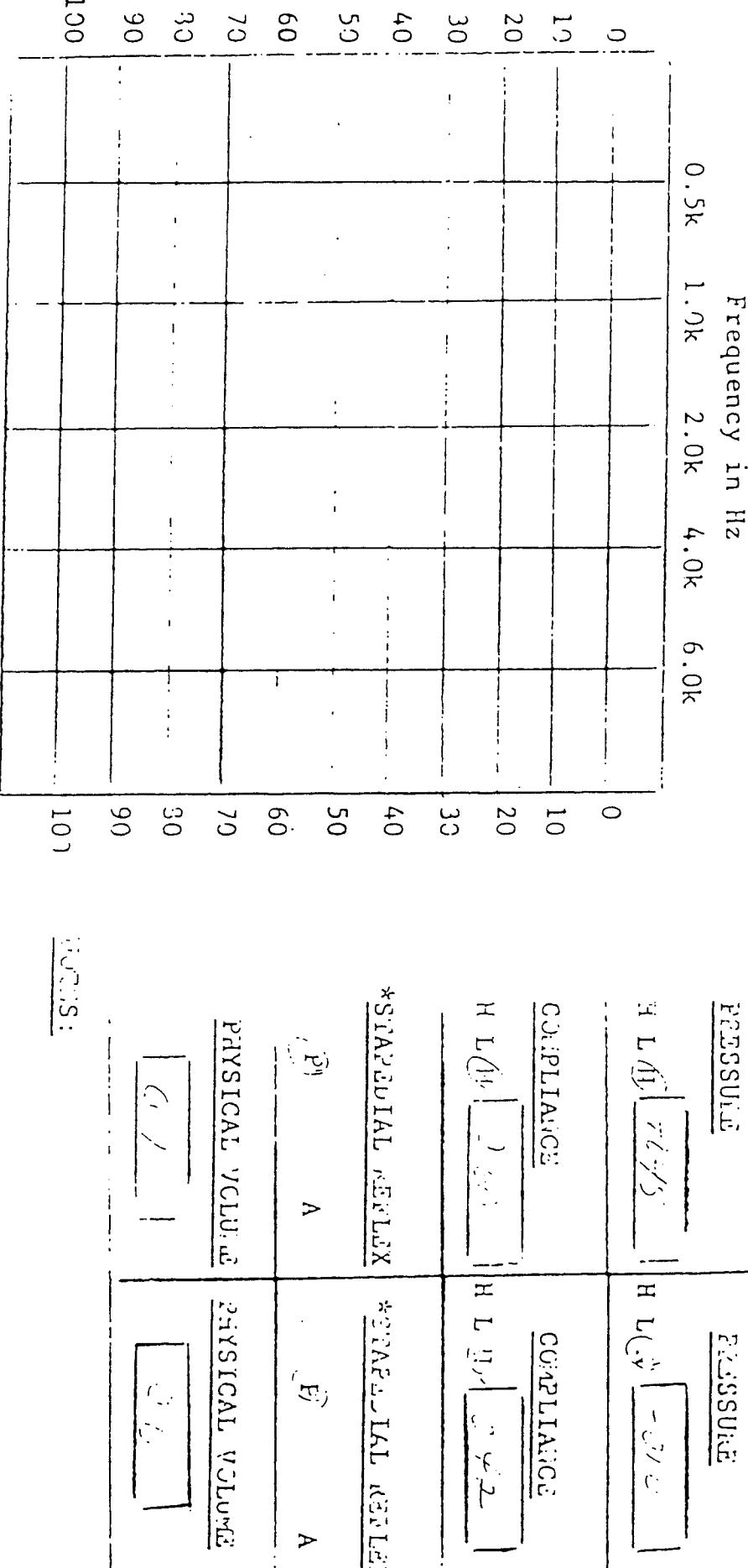
TESTS AT READING DISTANCE	TEST	POSSIBLE VISION HANDICAP	DOUT- FUL	PASSING NORMAL RANGE	DOUT- FUL	POSSIBLE VISION HANDICAP
USABLE VISION Both Eyes	DEPTH PERCEPTION			NORMAL		
USABLE VISION Right Eye	COLOR VISION Red vs. Green			NORMAL		
USABLE VISION Left Eye	COLOR VISION Blue vs. Violet			NORMAL		
POSTURE In-Out Imbalance				CAN TELL RED FROM GREEN		
FUSION				CAN TELL BLUE FROM VIOLET		
				EYES MOVE TOWARD RIGHT EYE MOVE TOWARD LEFT		EYES WORK IN BALANCE
				EYES MOVE TOWARD LEFT EYE MOVE TOWARD RIGHT		EYES ARE COORDINATED SEE A SINGLE IMAGE

Explanation of tests are on the back of this report form.

* Left eye either sightless or vision appears to be suppressed

+ Right eye either sightless or vision appears to be suppressed

NAME _____

IMPEDANCE RESULTS:RESULTS FOR LIGHT EAR RESULTS FOR LEFT EAR

MAKE: MACROMATIC
 MODEL: MU-1
 *STAPELOIDAL REFLEX conducted at 1.0 kHz at 105 dB

KEY:
 H = high N = normal P = present
 L = low A = absent

SCREENING TESTS

CURRENT		LAST PREVIOUS	
DATE	NORMAL OR NEGATIVE	DATE	NORMAL OR NEGATIVE
	(MM. INCH.)		(MM. INCH.)
11	10.0	11	10.0
12	10.0	12	10.0
13	10.0	13	10.0
14	10.0	14	10.0
15	10.0	15	10.0
16	10.0	16	10.0
17	10.0	17	10.0
18	10.0	18	10.0
19	10.0	19	10.0
20	10.0	20	10.0
21	10.0	21	10.0
22	10.0	22	10.0
23	10.0	23	10.0
24	10.0	24	10.0
25	10.0	25	10.0
26	10.0	26	10.0
27	10.0	27	10.0
28	10.0	28	10.0
29	10.0	29	10.0
30	10.0	30	10.0
31	10.0	31	10.0

RECOMMENDATIONS FOR ADJUSTMENT IN SCHOOL PROGRAM INCLUDING PARTICIPATION IN PHYSICAL EDUCATION AND SPORTS ACTIVITIES:

ENTIRELY WITHIN NORMAL LIMITS

009086

Case 1:90-cv-09023-SJD-MRM

Document

100

HEARING

1. David J. Vockel, Jr.

SIGNATURE OF EXAMINING PHYSICIAN

FOR USE WITH THE PEDIATRIC TELEBINOCULAR
SCHOOL SURVEY CUMULATIVE RECORD FORM NO. 53
(CATALOG ORDER NO. 5522-8)

Name Mike Moore Sex _____
School _____ City _____
Grade 2 Room _____ Teacher _____
Date of birth 10-17 Date of test 10-6-05
With glasses: RE LE Without glasses: RE LE

Wearing glasses? Yes: For reading only
for distance only _____; both _____; No _____
Snellen Standard (if desired)

009087

RAPID VISION SCREENING TESTS

Pass ✓ Fail —

Dog should be seen jumping over pig
The 4 blocks should be seen merged into 3

Balloon No. 2 is farthest away
Balloon No. 5 is closest

Balloon 2 is red; balloon 5 is green

Letters in Block A D C Z P T
Letters in Block B Z P D F C
Letters in Block C L D F C Z

Training only ✓

Training only ✓

Training only ✓

Yellow line should pass through white square
The 4 balls should be seen merged into 3

Letters in Block A L O Z P C
Letters in Block B T Z O D L
Letters in Block C O P T D C

Training only ✓

Training only ✓

Training only ✓

Failure on any test above indicates need for full test at right.

COMPREHENSIVE TEST BATTERY: QUESTIONS

What do you see?

Does the yellow line go through, above, or below the red ball?

To what number, or between what numbers, does the arrow point?

How many balls do you see?

In each signboard there are five diamonds (point) in one diamond is a dot. (point to first signboard, show dot in the left diamond.) Ask: Where is the dot in Nos. 2, 3, 4, 5, etc.?

Tests 5 and 6 are the same as No. 4. Ask: Where is the dot pointing to the top line of symbols, and name each one? Show by pointing that the cross stands out in 3-D. Ask: Which symbol stands out in each of the next lines?

What number is in the upper circle? The lower left? The lower right? (Test 9 is the same as Test 8.)

To what number, or between what numbers, does the arrow point?

How many balls do you see?

In the three circles in the center (point) you see black crossed lines, black dots, and solid gray. Starting with No. 1 of the outer circles, you see black dots. No. 2 has black lines which do you see in No. 3? Go on for as you can. Tests 13 and 14 are the same as 12: Name what you see in each of the circles.

TEST	LEFT EYE ONLY	RIGHT EYE ONLY	UNSATISFACTORY		RE-TEST AREA	EXPECTED RESPONSE	RE-TEST AREA	UNSATISFACTORY
			Unconventional w/for 10x visible vision	Conventional w/for 10x visible vision				
(DB-10A) Simultaneous Vision								
(DB-8C) Vertical Posture								
(DB-9) Lateral Posture	only 	only 	15	14	13	12	11	10 
(DB-4K) Fusion	only 	only 	3	2	1	0	9	8 
(DB-1D) Usable Vision, Both Eyes	1	2	3	4	5	6	7	8 
(DB-2D) Usable Vision, Left Eye	1	2	3	4	5	6	7	8 
(DB-20) Usable Vision, Right Eye	1	2	3	4	5	6	7	8 
(DB-6D) Usable Vision, Left Eye	1	2	3	4	5	6	7	8 
(DB-60) Stereopsis								
(DB-1A) Color Perception	100	Left Right	23	NONE CORRECT	1 Out of 3	2 Out of 3	ALL CORRECT	
(DB-1A) Color Perception	100	Left Right	56	NONE CORRECT	1 Out of 3	2 Out of 3	ALL CORRECT	
(DB-9B) Lateral Posture	Arrow only	Numbers only	10	9	8	7	6 	5 
(DB-5K) Fusion	only 	only 	3	2	1	0	9	8
(DB-15) Usable Vision, Both Eyes	1	2	3	4	5	6	7	8
(DB-15) Usable Vision, Right Eye	1	2	3	4	5	6	7	8
(DB-17) Usable Vision, Left Eye	1	2	3	4	5	6	7	8
(DB-17) Usable Vision, Right Eye	1	2	3	4	5	6	7	8

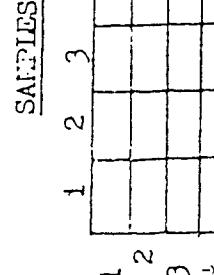
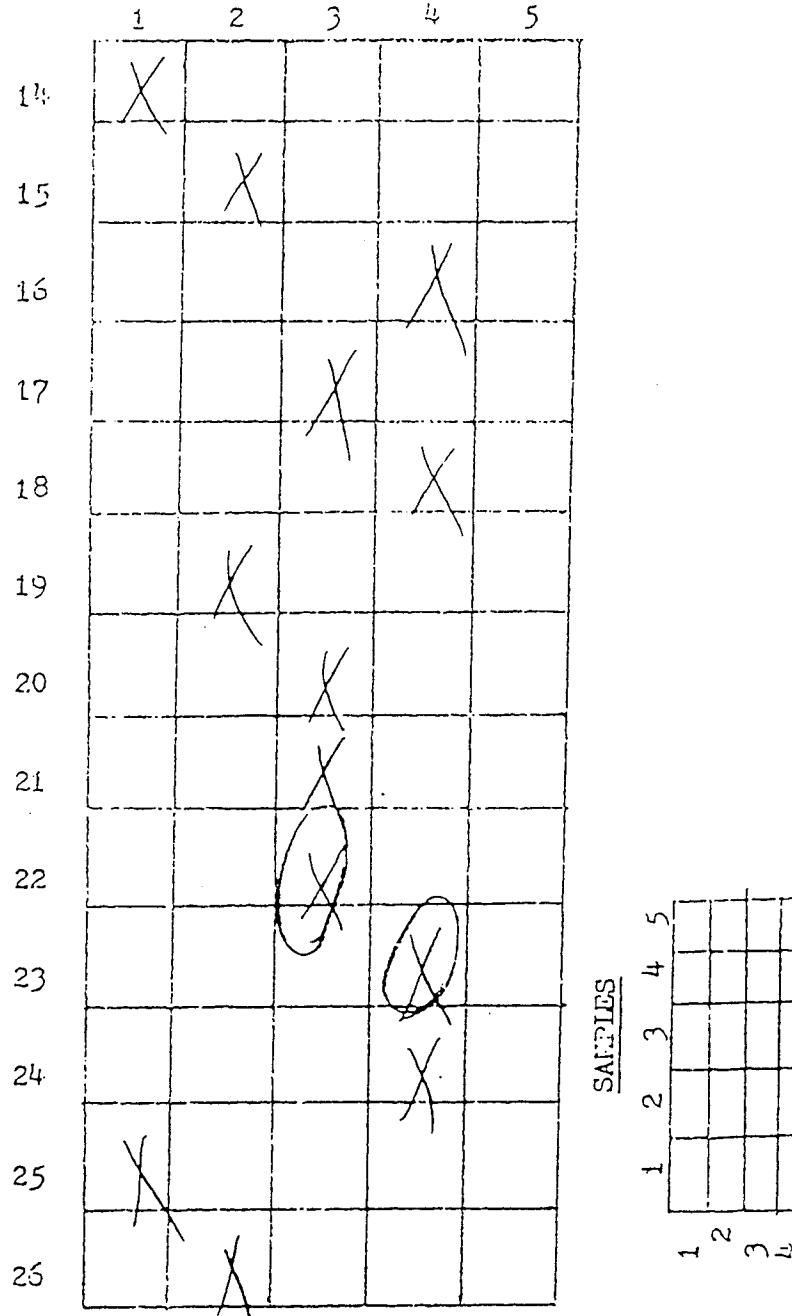
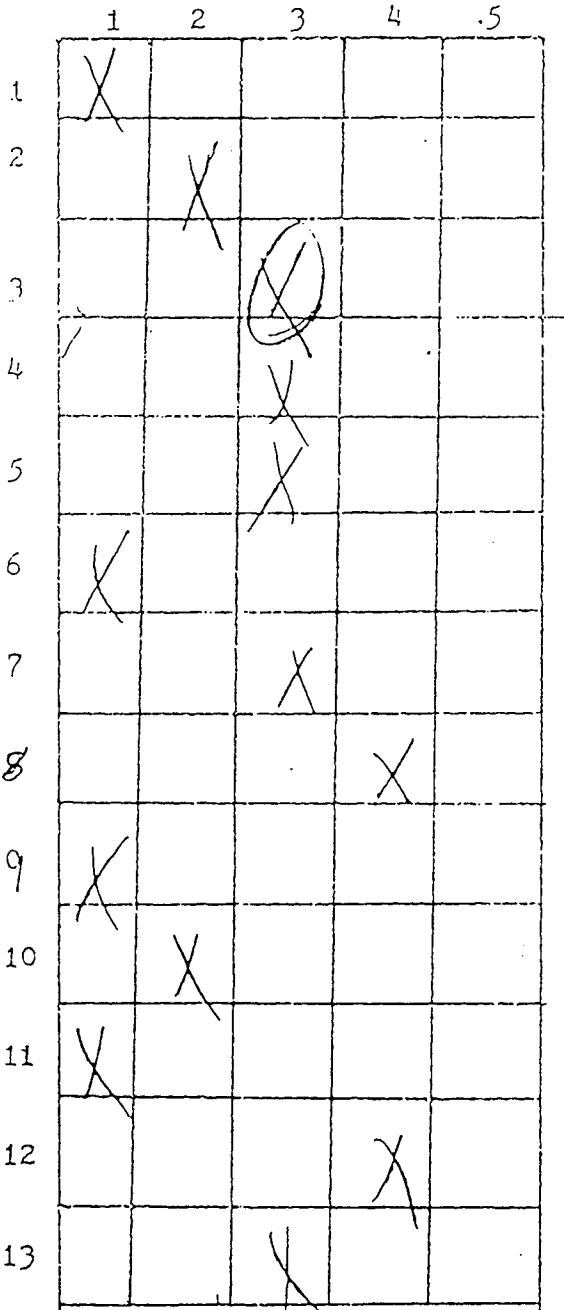
COLUMBIA MENTAL MATURITY SCALE

Individual Record Form

LEVEL A: Ages 3-6 through 3-11 • LEVEL B: Ages 4-0 through 4-5

Name Moore, Lee
Last First E Middle

Level: A B (Circle one)

Raw Score 39Date of Test 1979 8 17
Year Month DayAge Deviation Score 109Date of Birth 74 10 19
Year Month DayPercentile Rank 71Chronological Age 4 9 17
Years Months DaysStanine 6Maturity Index 50

	1	2	3	4	5
27					
28		X			
29			(X)		
30		X			
31	(X)				
32				X	
33	X				
34			X		
35	(X)				
36					
37	X				
38		(X)			
39			X		
40		X			
41			X		
42			(X)		
43		X			
44				X	
45			(X)		
46		(X)			
47	(X)				
48	X				
49			(X)		
50			(X)		
51			(X)		
52	X				
53			(X)		
54		X			
55			(X)		
56			X		
57			(X)		
58		X			
59			X		
60		X			
61				X	
62				X	
63				X	
64				X	
65				X	
66				X	
67				X	

	1	2	3	4	5
68				X	
69				X	
70		X			
71			X		
72					X
73		X			
74			X		
75				X	
76		X			
77			X		
78				X	
79				X	
80				X	
81			X		
82				X	
83				X	
84					X
85					X
86			X		
87		X			
88			X	X	
89		X			
90			X	X	
91				X	
92				X	
93					
94					
95					
96					
97					
98					
99					
100					
101					
102					
103					
104					
105					
106					
107					
108					

OBSERVATIONS OF TEST BEHAVIOR
of the subject during the torture session.

Examiner

009089

Survey Battery

Name Lee Moore Grade K
 Teacher Mrs. Betty Hensley Date of Testing 4/21-22 - 80
 School Central Baptist Elem City Cinti State Ohio

Score Summary Box

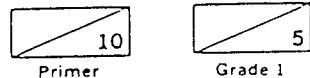
Test	Number Possible	Number Right	Scaled Score	Grade Equivalent	Percentile Rank	Stanine	Instructional Reading Level
Reading	37	26	476	1.5	90	1 2 3 4 5 6 7 8 9	Primer
Mathematics	35	33	492	2.7	96	1 2 3 4 5 6 7 8 9	
Language	25	20	375	1.2	84	1 2 3 4 5 6 7 8 9	
Basic Battery (R+M+L)	97	79	410	1.5	94	1 2 3 4 5 6 7 8 9	

Percentile Ranks and Stanines based on tables for Fall Spring

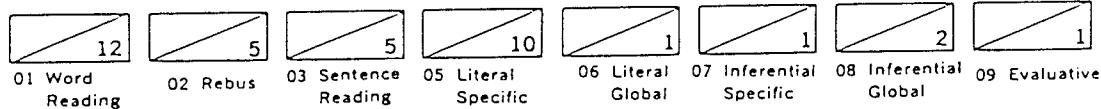
Cluster Analysis

READING

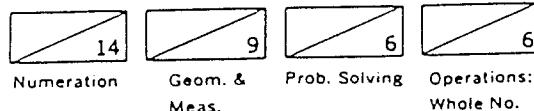
Performance by grade level of reading passages



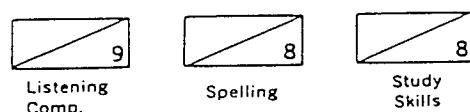
Performance by objective



MATHEMATICS



LANGUAGE



009090

Metropolitan Achievement Tests

Basic Survey Battery

Primary 1 Form JS

Lee Lee Lee Lee

Name	Lee Moore Jr	Grade	1
Teacher	Mrs. Moore	Date of Testing	4/15/11
School		City	
		State	Cincinnati

Score Summary Box

Test	Number Possible	Number Right	Scaled Score	Grade Equivalent	Percentile Rank	Stanine	Instructional Reading Level
Reading	55	40	577	2.2	77	1 2 3 4 5 6 7 8 9	(C-R)
Mathematics	40	21	401	1.7	42	1 2 3 4 5 6 7 8 9	
Language	40	30	45.8	2.1	70	1 2 3 4 5 6 7 8 9	
Basic Battery (R+M+L)	135	91	47.2	2.0	68	1 2 3 4 5 6 7 8 9	

Percentile Ranks and Stanines based on tables for Fall Spring

